Minnesota Department of Labor and Industry Construction Codes and Licensing Division Licensing and Certification-Manufactured Homes PO Box 64220

St. Paul, MN 55164-0220 Phone: (651) 284-5034 Fax: (651) 284-5743

E-mail: DLI.License@state.mn.us

www.dli.mn.gov

BOND NO.	*5,000.00	EFFECTIVE DATE	ENDING DATE January 1, 2015

**Manufactured Home Limited Dealer Bond** 

PRINT IN INK or TYPE KNOW ALL MEN BY THESE PRESENTS:	
THAT	
	ered with the Office of the Secretary of State)
(DBA, doing bus	siness as name if applicable)
•	
With business office at(Business add	dress, City, State, Zip Code, Telephone number)
as PRINCIPAL, and	
	(Surety Company Name)
(Surety Company Address, C	City, State, Zip Code, Telephone number)
Minnesota, as Surety, their successors, assigns, and lega	and authorized to do business in the state of al representatives are held and firmly bound, jointly and severally, to
	ry within the terms of this bond for payment in the amount of FIVE byided in M.S. 327B.04, subd. 8 (3). This bond is exclusively for the pursuant to M.S. 327B.11.
be issued upon the furnishing of this bond, if the Principal regulating or being applicable to the business of the Principal person dealing or transacting business with the Principal in the Pri	oplied for a Minnesota Manufactured Home Limited Dealer license to I faithfully complies with all of the statutes of the State of Minnesota, cipal as a limited dealer of manufactured homes and indemnifies any in connection with any manufactured home from any loss or damage my of the laws of the State of Minnesota, then no obligation under this in full force and effect.
	re on January 1, 2015. The aggregate liability of the Surety as defined above and shall in no event exceed the total sum of FIVE
	r and Industry, Construction Codes and Licensing Division, in writing nin 10 days of receipt of notification, the Department of Labor and M.S. 327B.11, Subd. 2.
Principal at the address as stated in this bond and to the I Division, 443 Lafayette Road No., St. Paul, MN 55155. The state of the I Division, 443 Lafayette Road No., St. Paul, MN 55155.	liability, by giving written notice by Certified Mail, addressed to the Department of Labor and Industry, Construction Codes and Licensing hirty (30) days after the mailing of that notice, this bond shall be null remaining liable, however, subject to all the terms, conditions, and s bond up to the date of the cancellation.
Signed and sealed this day of	(SURETY SEAL)
Print Name of Principal (s)	SIGNATURE OF PRINCIPAL(S)
Print Name of Principal (s)	SIGNATURE OF PRINCIPAL(S)

CC0516 Manufactured Home Dealer Bond (10/12)

443 Lafayette Road N St. Paul, Minnesota 55155

attorney form.

File with:

Acknowledge (notarize) signatures on reverse side and attach power of

Minnesota Department of Labor and Industry

CCLD - Licensing and Certification

SIGNATURE OF ATTORNEY IN FACT (SURETY COMPANY)

NAME OF SURETY

## A OR B AND C MUST BE COMPLETED

A. FOR ACKNOWLEDGEMENT OF Individual, Partnership, Limite (Note: If partnership all signatures required to be notarized. Plea	
STATE OF)	
STATE OF)  COUNTY OF)  ss	
On this day of personally came	
to me well known to be the identical person(s) described in and who ex	xecuted the foregoing bond and he/she/they acknowledged the same
to be his/her/their own free act and deed.	
(SEAL)	Notary Public, County,
	My Commission Expires
B. FOR ACKNOWLEDGEMENT of Corporate  STATE OF) SS COUNTY OF)	
On this day of personally came	
who being by me duly sworn, did say that he/she is	
of	
acknowledged said instrument to be the free act and deed of the corpo	oration.
(SEAL)	Notary Public,County,
	My Commission Expires
PART C MUST BE COMPLETED BY THE SURETY C. FOR ACKNOWLEDGEMENT of Corporate Surety	COMPANY
STATE OF)	
COUNTY OF) ss	
On this day of personally came	
and	to me personally known, who being by me duly sworn, did say that
he/she is the attorney in fact, of	the
corporation whose name is affixed to the foregoing instrument; that the	e seal affixed to the foregoing instrument is the corporate seal of the
said corporation; and that said instrument was executed in behalf of sa	aid corporation by authority of its board of directors and said
fact as the free act and deed of said corporation.	_ acknowledged that he/she executed said instrument as attorney in
(SEAL)	Notary Public,County,
	My Commission Expires

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